

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Attorney Docket No. MAFF-1 RCE

Examiner Juliet C. Einsmann
Art Unit 1634

Mail Stop RCE
Hon. Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

REQUEST FOR CONTINUED EXAMINATION

Sir:

This is a request for continued examination under 37 C.F.R. § 1.114, of pending prior Application No. 09/721,114, (Confirmation No. 2997), filed on November 22, 2000 for NOVEL GENE INVOLVED IN BRASSINOSTEROID RESPONSES.

1. ☒ Please enter the Amendment Pursuant to 37 C.F.R. § 1.116 filed on December 31, 2003 in Application No. 09/721,114.
2. ☐ Please consider the arguments in the Appeal Brief or Reply Brief filed on _____ in Application No. _____.
3. ☐ An Amendment/Reply is enclosed.
4. ☐ Affidavit(s)/Declaration(s) is/are enclosed.
5. ☐ An Information Disclosure Statement is enclosed.
6. ☐ A suspension of action on the above-identified patent application is requested under 37 C.F.R. § 1.103(c) for a period of _____ months.
7. ☒ A check in the amount of \$770.00 in payment of the fee under 37 C.F.R. § 1.17(e) is enclosed.
8. ☐ Please charge \$770.00 to Deposit Account No. 06-1075 in payment of the fee under 37 C.F.R. § 1.17(e). A duplicate copy of this Request is enclosed.
9. ☒ The Director is hereby authorized to charge payment of any additional fees required under 37 C.F.R. § 1.17(e) in connection with this Request, or to credit any overpayment of same, to Deposit Account No. 06-1075. A duplicate copy of this Request is enclosed.
10. ☐ Please grant a ☐ one-month, ☐ two-month, ☐ three-month, ☐ four-month, extension of time under 37 C.F.R. § 1.136(a) to the Examiner's Action of _____ in the above-identified patent application.
11. ☐ A check in the amount of \$_____ in payment of the extension-of-time fee is enclosed.
12. ☒ The Director is hereby authorized to charge payment of any additional extension-of-time fees required under 37 C.F.R. § 1.17 in connection with this paper, or to credit any overpayment of same, to Deposit Account No. 06-1075. A duplicate copy of this Request is enclosed.

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13. ☐ Please charge the extension-of-time fee of \$ _____ to Deposit Account No. 06-1075. A duplicate copy of this Request is enclosed.

April 07, 2004
(Date)



Grant Kalinowski (Reg. No. 48,314)

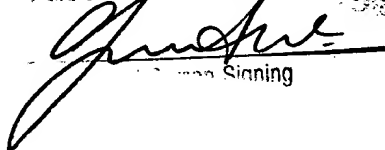
☐ Attorney or agent of record
☒ Filed under § 1.34(a)

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I hereby certify that this
Correspondence is being
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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450 on

April 7, 2004

Maure J. Saintil-van Goodman


Maure J. Saintil-van Goodman Signing